									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Efféctive October 1, 2003								(6695403					
		•	SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY										
T	OTAL CLAIM	s ·.		: 25		· ·	ŀ	RATE	FE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASICF	EE 385.0)OI	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			と minus 20=		·	. 1		XS 9=		Of	X\$18=	90	
INI	DEPENDENT (ZAIMS	3.	3: minus 3 =		6		X43=		OF	X86=	•	
M	JLTIPLE DEPE	NDENT CLAIM	PRESENT		·			+145=		OF	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	-	OF	<u> </u>	860-	
, , CLAIMS AS AMENDED - PART II								OTHER THAN					
6	6/29/05 (Column 1) (Column 2) (Column 3)							SMAL	L ENTIT	OR —	SMALL	ENTITY	
AMENDMENT A		CLAIMS . REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI TIONA FEE		RATE:	. ADDI- TIONAL FEE	
MON	Total	. 24	Minus	- 2	5	-		X\$ 9=		OA	X\$18=		
AME	Independent	. 6	Minus		3	1-3		X43=		OR	1 2000	600	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
		/						TOTA		OR	TOTAL ADDIT, FEE	600	
(Column 2) (Column 3)									E		ADDIT, PEE		
8		CLAIMS REMAINING		HIGHE	ST	PRESENT	lr		ADDI	7		ADDI-	
•	•	AFTER AMENDMENT		PREVIOL PAID FI		ISLY EXTRA		RATE	TIONA	4	RATE	TIONAL FEE	
AMENDMENT	Total	/8	Minus	25		=		X\$ 9=		OR	X\$18 =		
AME	independent	1. 5	Minus	(_	•'		X43=	-	7 ₀₈	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290≈	-	
							A	TOTAL		OR	YOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
2		CLAIMS REMARKING AFTER		HIGHE NUMBI PREVIOL	ER JSLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL]	RATE	ADDI- TIONAL	
AMENDINEN	Total	* THENDMENT	Minus	FAID F	UH		-		FEE	┨ .		FEE	
	Independent	•·	Minus	64		-	-	X\$ 3=	ļ	AO	X\$18=		
ŧ ;	1				CLAIM	 		X43=		OR	X8G=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= OR +290=													
is (the 'Highest Nun	nn 1 is less than thi iber Previously Pai ilber Previously Pa	d For IN THIS	S SPACE is I	ess llian	20. enter "20."	۸۵	TOTAL COIT. FEE		ОЯ	TOTAL ADDIT. FEE		
		er Previously Paid					ious	d in die ap	propriate b	os in coh	ena I.	1	

र करने । विवर्धन्त्रकार रोग न वर्षे के विवर्धनात कर के साहित्र करिय